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PTO/SB/21 (10-96)

Approved for use through 10/31/99. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

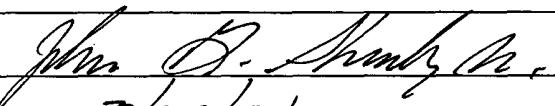
8

| | |
|------------------------|-----------------------|
| Application Number | 09/751,357 |
| Filing Date | 12/29/00 |
| First Named Inventor | ALEKSANDRA KOLOSOWSKY |
| Group Art Unit | 2851 |
| Examiner Name | UNKNOWN |
| Attorney Docket Number | H17-26086 US |

ENCLOSURES (check all that apply)

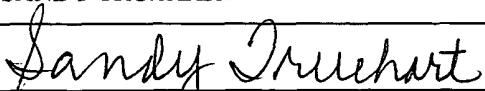
| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ <input type="checkbox"/> Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input checked="" type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Checklist and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> After Allowance Communication to group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; min-height: 50px; margin-top: 10px;">Executed Declaration and Power of Attorney</div> |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | JOHN G. SHUDY, JR. REG. NO. 31,214 |
| Signature |  |
| Date | 3/20/01 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope address to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

| | | | |
|----------------------|---|------|---------|
| Type or printed name | SANDY TRUEHART | | |
| Signature |  | Date | 3-21-01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents Box Patent Application, Washington, DC 20231.

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MAR 23 2001

FEE TRANSMITTAL
For FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT \$ 1078.00

COMPLETE IF KNOWN

| | |
|----------------------|-----------------------|
| Application No. | 09/751,357 |
| Filing Date | 12/29/00 |
| First Named Inventor | ALEKSANDRA KOLOSOWSKY |
| Group Art Unit | 2851 |
| Examiner Name | UNKNOWN |
| Attorney Docket No. | H17-26086 US |

METHOD OF PAYMENT (check one)1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:Deposit Account Number **01-1125**Deposit Account Name

Charge any Additional Fee Required
Under 37 CFR §§1.16 & 1.17

2. Payment Enclosed:
 Check Money Order Other**FEE CALCULATION****1. BASIC FILING FEE**

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|-----------------|-----------|
| Fee Code | Fee \$ | Fee Code | Fee \$ |
| 101 | 710 | 201 | 355 |
| 106 | 320 | 206 | 160 |
| 107 | 490 | 207 | 245 |
| 108 | 710 | 208 | 355 |
| 114 | 150 | 214 | 75 |
| SUBTOTAL (1) | | | \$ 710.00 |

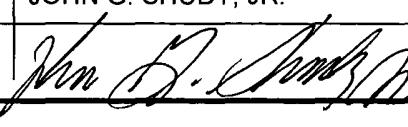
2. EXTRA CLAIM FEES

| Extra Claims | Fee from below | Fee Paid |
|---------------------------|----------------|----------|
| Total Claims 31 - 20 = 11 | x 18. = 198.00 | |
| Independent Claims - 3 = | x = | |
| Multiple Dependent Claims | | |

| Large Entity | | Small Entity | |
|--------------|--------|--------------|-----------|
| Fee Code | Fee \$ | Fee Code | Fee \$ |
| 103 | 18 | 203 | 9 |
| 102 | 80 | 202 | 40 |
| 104 | 270 | 204 | 135 |
| 109 | 80 | 209 | 40 |
| 110 | 18 | 210 | 9 |
| SUBTOTAL (2) | | | \$ 198.00 |

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|------------------------------------|--------------|-----------------|-----------|
| Fee Code | Fee \$ | Fee Code | Fee \$ |
| 105 | 130 | 205 | 65 |
| 127 | 50 | 227 | 25 |
| 139 | 130 | 139 | 130 |
| 147 | 2,520 | 147 | 2,520 |
| 112 | 920* | 112 | 920* |
| 113 | 1,840* | 113 | 1,840* |
| 115 | 110 | 215 | 55 |
| 116 | 390 | 216 | 195 |
| 117 | 890 | 217 | 445 |
| 118 | 1390 | 218 | 695 |
| 128 | 1890 | 228 | 945 |
| 119 | 310 | 219 | 155 |
| 120 | 310 | 220 | 155 |
| 121 | 270 | 221 | 135 |
| 138 | 1,510 | 138 | 1,510 |
| 140 | 110 | 240 | 55 |
| 141 | 1240 | 241 | 620 |
| 142 | 1240 | 242 | 620 |
| 143 | 440 | 243 | 220 |
| 144 | 600 | 244 | 300 |
| 122 | 130 | 122 | 130 |
| 123 | 50 | 123 | 50 |
| 126 | 240 | 126 | 240 |
| 581 | 40 | 581 | 40 |
| 146 | 710 | 246 | 355 |
| 149 | 710 | 249 | 355 |
| Other fee (specify) | | Missing Parts | 130.00 |
| Other fee (specify) | | | |
| * Reduced by Basic Filing Fee Paid | | SUBTOTAL (3) | \$ 170.00 |

SUBMITTED BYTyped or Printed Name **JOHN G. SHUDY, JR.**Signature **COMPLETE IF APPLICABLE**Registration Number **31,214**Deposit Account User ID **3/20/01****WARNING:**

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 09/751,357 | 12/29/2000 | Aleksandra Kolosowsky | H17-26086 (256.063US1) |

CONFIRMATION NO. 8831

FORMALITIES LETTER

SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.
P.O. Box 2938
Minneapolis, MN 55402



OC000000005781034

Date Mailed: 02/20/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

03/27/2001 TBESMRH1 00000066 011125 09751357

01 FC:101 710.00 CH
02 FC:103 198.00 CH
03 FC:105 130.00 CH

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- Total additional claim fee(s) for this application is \$198.
 - \$198 for 11 total claims over 20.
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 1038.

*A copy of this notice **MUST** be returned with the reply.*

EP

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE